## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 31, 2008 08:00 AM DOCUMENT #F28261 **Secretary of State** 1. Entity Name ARTISAN TILE & MARBLE, INC. Principal Place of Business Mailing Address **101 FERN STREET** 101 FERN STREET C/O ARNOLD M. HESS C/O ARNOLD M. HESS JUPITER, FL 33458 JUPITER, FL 33458 No Chg-P 01072008 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 22-1737540 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HESS, ARNOLD M. DO NOT WRITE 101 FERN STREET JUPITER, FL 33458 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 \_\_\_\_U00000808140 02/07/08-80035-008\_150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE HESS, ARNOLD M NAME STREET ADDRESS 878 FATHOM COURT CITY-ST-ZIP N PALM BEACH, FL 00000. DS TITLE NAME HESS, BERENICE G. 878 FATHOM COURT STREET ADDRESS CITY-ST-ZIP N. PALM BEACH, FL. TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment withyan address, with all other like empowered.

SIGNATURE:

TITLE

STREET ADDRESS

GNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

1-28.0

5417463737

Daytime Phone #

**FILED**